### Meeting of the

# Medicaid Physician Advisory Committee (MPAC) Department of Medical Assistance Services (DMAS) 600 East Broad Street, Suite 1300 Richmond, Virginia

#### **December 16, 2003**

## DRAFT

**Present:** 

Dr. William Cook Mr. Lawrence Bates Dr. Albert Finch

Dr. Daphne Bryan

Dr. Todd L. vanden Hoek (on phone)

Dr. Karen Rheuban (on phone)

**Absent:** 

Dr. Leon Brown

Dr. Christine Matson

Dr. Mark Arner

Dr. Eloise Haun

Dr. Swaeng Woraratanadharm

Dr. Lornel Tompkins

Dr. Frederic Garner

**DMAS Staff:** 

Patrick Finnerty, Director

Cindi Jones, Chief Deputy Director

Craig Markva, Manager, Office of Communications

and Legislative Affairs

Chris Schroeder, Committee Liaison

Bryan Tomlinson, Director Health Care Services Division

Scott Cannady, Manager Program Support

**Program Support Division** 

# Adoption of the October 14th Minutes

DMAS Director Patrick Finnerty opened the meeting and thanked everyone for attending. Mr. Finnerty told the committee that they could not adopt the minutes because a quorum was not present. Mr. Finnerty also introduced Dr. Albert Finch who will be replacing Lawrence Bates on the Committee.

#### Discussion of Patient "No-Shows" Follow-up

Mr. Finnerty asked the Committee to review the handout concerning patient "no-shows" in the Medicaid system. He told the Committee that Chris Schroeder had researched this issue and that DMAS had requested information on this issue from the 52 agencies that oversee the Medicaid system in the United States and its territories. Mr. Finnerty asked the Committee if they had any comments on this issue. Dr. William Cook and Dr. Albert Finch commented that you cannot charge the patients for missed visits. Dr. Cook added that some physicians will close their practice to folks that miss too many appointments. Mr. Finnerty than asked the Committee if physicians realize that they can release a patient in a practice for chronic "no-shows". The Committee said that they believe physicians know about this policy. Dr. Cook said that in his office he uses overbooking to solve patient "no-shows". Mr. Finnerty then asked the Committee what some strategies would be to help solve the issue. Dr. Cook suggested that DMAS assign

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particular patients to case management and that office administrators be allowed to remove patients for three missed appointments in a year. He also suggested that Medicaid pay for the third missed appointment. Mr. Finnerty said that there is little hope for that payment since DMAS must adhere to Federal government regulations. Mr. Finnerty suggested that DMAS draft a plan of how physicians could address the issue of "no-shows" that can be shared with physicians and patients.

#### **Overview of DMAS Pharmacy Program Changes**

Bryan Tomlinson, Director Health Care Services Division gave a presentation on the overview of DMAS pharmacy program changes. Bryan covered the major issue of the Preferred Drug List (PDL) issue in his presentation that sparked some interest with the Committee. Some of the Committee members were very concerned with the new PDL. Dr. Cook felt that the new PDL system will add another layer of burden to his practice. He told the Committee that he already has 10 formularies from different plans that he needs to work from. Dr. Daphne Bryan was also concerned because she felt that some patients will be required to start on new drugs that might have bad side effects. She said that you cannot switch the drugs in mid-stream. Mr. Finnerty told the Committee that those patients currently on some medicines could stay on these drugs if prior authorization was approved. Dr. Finch had a concern with this new system because the new PDL could not be loaded on a PDA like many other formularies. Mr. Finnerty told the Committee that this is possible to do with our new system and will look into it. Cindi Jones told the Committee that the PDL was required by the Appropriations Act and that all decisions regarding which drugs were "preferred" were made by the Pharmacy and Therapeutics (P and T) Committee Dr. Cook was concerned with the list because now he will have to spend more time on the phone with the pharmacies and with First Health Services. He told the Committee that a lot of doctors will drop Medicaid because of this new system. Dr. Finch added that you cannot continue to pay low Medicaid rates and expect the doctors to accept this new system with open arms.

#### **Paying Out-of-Network Specialists**

Scott Cannady, a manager in the program support division gave a short presentation on paying out-of-network specialists. Mr. Cannady covered the issue of how providers can enroll in the Medicaid system in order to be paid for services provided to a Medicaid recipient. Mr. Cannady also covered the common misconceptions about provider enrollment in the Medicaid program.

#### **Other Business**

Mr. Finnerty told the Committee that the only item he wanted to discuss was the Joint Commission on Health Care's (JCHC) recommendations for physician reimbursement. Dr. Cook mentioned that the Pediatric Association of Virginia was supporting the JCHC recommendations except they were recommending another 5% increase to bring the total to 80% of Medicare payment. Dr. Cook asked Mr. Finnerty if DMAS and the MPAC could write a letter to the General Assembly in support of higher reimbursement rates. Mr. Finnerty said that DMAS could not write a letter of support but that the MPAC as a whole could write a letter to the

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chairmen of the Senate Finance and House Appropriations Committees stating their support for the higher reimbursement rates. Mr. Finnerty indicated that DMAS staff would draft a letter for the MPAC and get a final letter to the appropriate General Assembly members.

#### **Next Meeting and Agenda Items**

A date for the next MPAC was not set. Dr. Bryan raised the issue of addressing the Hispanic population in the Medicaid system. Specifically, Dr. Bryan was wondering if there are any translation services available through the Medicaid program. DMAS staff will research this issue for a future meeting.